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7590 12/09/2005

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Lisa R. Jeanetta

(Depositor's name)

*Lisa R. Jeanetta*

(Signature)

March 8, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/977,644	11/24/1997	RALPH EMERSON	PROG.003.00U	3349

TITLE OF INVENTION: USE OF AROMATIC ALDEHYDES AS INSECTICIDES AND FOR KILLING ARACHNIDS  
03/14/2006 WABDELR3 00000051 08977644

01 FC:2501	700.00 OP	30.00 OP	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
02 FEE TYPE	SMALL ENTITY		\$700	\$0	\$700	03/09/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEVY, NEIL S	1615	424-405000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Dorsey &amp; Whitney LLP</u>
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee name will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ProGuard, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Suisun, California

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies 10

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A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2319 (enclose an extra copy of this form).

(Order No. 469201-109)

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_\_\_\_\_

*Diane J. Mason*

Date March 8, 2006

Typed or printed name \_\_\_\_\_

Registration No. 43,777

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